DEA # _____

NPI # _____

JAMES T. CAMPAGNA, M.D., A.B.F.P., P.C.
PA LIC # MD039518-L
605 SCENERY DRIVE
ELIZABETH, PA 15037
412-751-0200

NAME James Ramsey

DOB

ADDRESS _____

DATE 10/18

Rx (PLEASE PRINT)

Due to End
Stage Lung Disease
This pt is not eligible
to go to Federal
Court

REFILL _____ TIMES _____ PRN _____ NR _____

SUBSTITUTION PERMISSIBLE _____ M.D.

IN ORDER FOR A BRAND NAME PRODUCT TO BE DISPENSED,
THE PRESCRIBER MUST HANDWRITE 'BRAND NECESSARY' OR
'BRAND MEDICALLY NECESSARY' IN THE SPACE BELOW.

11-19-15

TRI151119_69853_01_120181

"Exhibit 1"